

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE
14 JUL 15 PM 2:54

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Ben Cardin for Senate, Inc.

ADDRESS (number and street)

P.O. Box 21093

☐ Check if different than previously reported. (ACC)

Catonsville

MD

21228

2. FEC IDENTIFICATION NUMBER ▼

C C00411587

3. IS THIS REPORT

☒ NEW (N)

OR

☐ AMENDED (A)

ZIP CODE ▲
STATE ▼ DISTRICT

MD

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
☒ July 15 Quarterly Report (Q2)
☐ October 15 Quarterly Report (Q3)
☐ January 31 Year-End Report (YE)

☐ Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
04 / 01 / 2014

through

M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Mathias

Signature of Treasurer

Robert Mathias

Robert J. Mathias

Date

M M / D D / Y Y Y Y Y Y
07 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3
(Revised 02/2003)

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